

Lincoln Police Department Thomas K. Casady, Chief of Police 575 South 10th Street Lincoln, Nebraska 68508

402-441-7204 fax: 402-441-8492



MAYOR CHRIS BEUTLER

lincoln.ne.gov

February 24, 2009

Mayor Beutler and City Council City of Lincoln City County Building Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of South Fast Break, 1648 South Street requesting a class B liquor license.

Paulina Nguyen, owner has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Paulina Nguyen was born in Vietnam. She attended Lincoln High School graduating in 1994.

Paulina Nguyen employment history is as follows:

2008 - Present	Owner, Ambiance Nail Spa	Lincoln, NE.
2009 - Present	Owner, South Fast Break	Lincoln, NE.
2005 - 2006	Tech, Maple Nails	Lincoln, NE.
2004 - 2005	Staff, INS	Lincoln, NE.

Mrs. Nguyen will complete the required training on March 12th 2009.

Stockholder information has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebras (a.

THOMAS K. CASADY, Chief of Police



APPLICATION FOR LIQUOR LICENSE RECEIVED **CHECKLIST** 301 CENTENNIAL MALL SOUTH PO BOX 95046 84261 FEB 10 2009 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 NEBRASKA LIQUOR Website: www.lcc.ne.gov CONTROLCOMMISSION Brak Previous Trade Name E-Mail Address: Provide all the items requested. Failure to provide any item will cause this applica ion to be returned or placed on hold. All documents must be legible. Any false statement or omission ruay result in the denial, suspension, cancellation or revocation of your license. If your operation depends on receiving a liquor license, the Nebraska Liquor Control Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to sub mitting your application review the application carefully to ensure that all sections are complete, and that ary omissions or errors have not been made. You may want to check with the city/village or county clerk, where you are making application, to see if any additional requirements must be met before submitting application to the state. REQUIRED ATTACHMENTS Each item must be checked and included with application or marked N/A (not appl cable) 1. Fingerprint cards for each person (two cards per person) must be enclosed with a check payable to the Nebraska State Patrol for processing in the amount of \$38.00 per person. All areas must be completed on cards as per brochure. ✓ 2. Enclose registration fee for Control Commission. ✓ 3. Enclose the appropriate an Form 2; Corporate - Form 3a; Limit FOR 3b requires Corporate Manager appl 4. If building is being leased CASH of LLC name being applied for. Als CHECK # building owned, send a copy of the MONEY# 5. If you are buying the busin from licensee. This also needs to be

BUS 1026



6. If wishing to run on current liquor license enclose temporary agency agreement (must be Commission form only, must include copy of signature card from the bank showing both the seller and buyers name on account).
7. Copy of alcohol inventory being purchased. Inventory shall include brand names and container sizes. Inventory may be taken at the time application is being submitted.
8. Enclose a list of any inventory or property owned by other parties that ar : on the premise.
9. For individual, partnership and LLC enclose proof of citizenship; copy of birth certificate (certificate from the State where born, not hospital certificate), naturalization paper or passport, for all applicants, members and spouses.
10. If corporation or LLC enclose a copy of articles as filed with the Secreta y of States Office. The document must show barcode.
11. Check with local governing bodies for any further requirements or restrictions.

I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 45-60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

12. If you have a business plan, please submit a copy.

Signature

APPLICATION FOR LIQUOR LICENSE

301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: www.lcc.ne.gov/

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FEB 10 2009

NEBRASKA LIQUOR CONTROLCOMMISSION

CLA CHE	SS OF LICENSE FOR WHI CK DESIRED CLASS(S)	ICH APPLICATION	IS MADE AND FEES			
RETA	D BEER, WINE & DIST	NLY TILLED SPIRTS, ON & TILLED SPIRITS, OFF TILLED SPIRITS, ON S	SALE ONLY ALE ONLY	Application Fee \$45.00 \$45.00 \$45.00 \$45.00 \$45.00 \$100.00		
MISCELLANEOUS L Craft Brewery (Brew Pub) \$295.00 \$1,000 minimum none V Manufacturer Alcohol & Spirits \$1,045.00 \$1 to 100 barrel* \$1,000 minimum services \$1,000 minimum se						
*daily c	capacity, average daily barrel production ison exists, the manufacturing licens	etion for the previous twelv see shall pay in advance for	e months of manufacturing operate the first year's operation a fee of	on. If no such basis for ñve hundred dollars		
All oth	ass C licenses expire October 31 st her licenses expire April 30 th ng license (K) expires same as un					
TYPE	OF APPLICATION BEING	G APPLIED FOR (C)	HECK ONE)			
Individual License (requires insert form 1) Partnership License (requires insert form 2) Corporate License (requires insert form 3a & 3c) Limited Liability Company (requires form 3b & 3c)						
	E OF PERSON OR FIRM Anission will call this person w			n)		
Name_	Paulina Signi	JEN_	Phone number:(405) 617-6475		
Firm N	Firm Name					

PREMISE INFORMATION	
Trade Name (doing business as) South Fast Brak	
Street Address #1 1648 South St.	
Street Address #2	
City Lincoln County Lancastro	_Zip Code
Premise Telephone number (402) 477-552-/	
Is this location inside the city/village corporate limits:	NO
Mail address (where you want receipt of mail from the commission)	
Name faulina AguyEss	
Street Address 2540 Southview CR	
Street Address #2	
City Lincoln State RE	Zip Code_68512
DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED	
In the space provided or on an attachment draw the area to be licensed. This should include sto	rage areas, basement, sales

areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations. No blue prints please. Be sure to indicate the direction north and number of floo s of the building.

**For on-premise consumption liquor licenses minimum standards must be met by providing at least two restrooms

APPLICANT INFORMATION

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY. Has anyone who is a party to this application, or their spouse, <u>EVER</u> been convicted of or ple id guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name. NO
If yes, please explain below or attach a separate page.
·
2. Are you buying the business and/or assets of a licensee? YES NO If yes, give name of business and license number Thanh Mai Properties LLC a) Submit a copy of the sales agreement including a list of the furniture, fixtures and equipmer t. b) Include a list of alcohol being purchased, list the name brand, container size and how many # 73223
Are you filing a temporary agency agreement whereby current licensee allows you to operate on their license? YES NO If yes, attach temporary agency agreement form and signature card from the bank. This agreement is not effective until you receive your three (3) digit ID number from the Commission.
A. Are you borrowing any money from any source to establish and/or operate the business? YES NO THE BANK If yes, list the lender
5. Will any person or entity other than applicant be entitled to a share of the profits of this bus ness? YES NO If yes, explain. All involved persons must be disclosed on application.
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? YES NO If yes, list such items and the owner.
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? YES NO If yes, explain. No silent partners

8. Are you premises to be licensed within 150 feet of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 feet of a college or university campus? YES NO If yes, list the name of such institution and where it is located in relation to the premises (Nel. Rev. Stat. 53-177)					
9. Is anyone listed on this application a large YES NO If yes, list the person, the law enforcement duties			n's exact		
10. List the primary bank and/or financia who will be authorized to write checks at Tierbue Bank 34/0 N.	al institution (brand/or withdrawals	ch if applicable on accounts at	e) to be utilize the institution	d by t ie busino i. <i>fa dino</i> teu' d	ess and the individual(s NgufE No (HBband
11. List all past and present liquor licens Include license holder name, location of I previously held.	es held in Nebrask license and license	a or any other number. Also	state by any p list reason fo	erson named in r term ination o	n this application. of any license(s)
12. List the training and/or experience (when and where) of the person(s) making application listed as followed: a) Individual, applicant only (no spouse) b) Partnership, all partners (no spouses) c) Corporation, manager only (no spouse) d) Limited Liability Company, manager only (no spouse)					
Name:	May - 2006	Where:	Toot	Ried	9
Julian I Glase	1.00 - 200	Sou Gi	Fasc	or are	
13. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership. If leased, submit a copy of the lease covering the entire license year. Documents must show title or leas; held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed. Lease: expiration date Deed Purchase Agreement					
14. When do you intend to open for busin 15. What will be the main nature of busin 16. What are the anticipated hours of open 17. List the principal residence(s) for the principal separate sheet.	ess? Conv	2009 Encènce M-T;	Store 5-12 ired to sign, in	F; 7-18	Sat; 7 ³⁰ -10 es. If necessary attach
RESIDENCES FOR THE	PAST 10 YEARS.	APPLICANT	AND SPOUSI	E MUS T COMI	ELETE
APPLICANT: CITY & STAT!	YEAR	SPOUSE: CIT		is all he	YEAR
Pauling Slavier	FROM TO	8 #	zi M		FROM TO
208 Groveland St.	/ / / 0 000	218	3 Gravis	and F.	1970 000
Lincoln nE 6852	/	Lin	coln To	1852	

M

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background investigation and release and future records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation of any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowled gethat any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplet and investigation and release present and future records of every kind and description and release present and future records of every kind and description and release present and future records of every kind and description and release present and future records of every kind and description and release present and future records of every kind and every kind and description and release present and future records of every kind and description and release present and future records of every kind and description and release present and future records of every kind and description and release present and future records of every kind and description and spouse(s) and spouse(s

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approve I manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules regulations, and ordinances an I to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited L ability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock and spouses). Full (birth) names only, no initials.

and the second s	
Signature of Applicant	Signature of Spouse
Signature of Applicant	Signature of Spouse
Signature of Applicant	Signature of S _j ouse
Signature of Applicant	Signature of S _i ouse
Signature of Applicant	Signature of S ₁ ouse
State of Nebraska	
County of LANCAS TER	County of LANCASTER
The foregoing instrument was acknowledged before me thisUT_4,UUJ byby	The foregoing instrument was a knowledged before me this 00 4, 200 by
anylang	ampling
Notary Public signature	Notary Public signatu e
Affix Seal Here GENERAL NOTARY-State of Nebraska AMY DANG By Camp. Exp. July 7, 2012	GENERAL NOT IRY-State of Nebraska MY DANG My Com n. Exp. July 7, 2012

in compliance with the ADA, this manager insert form 3c is available in other formats for persons with disabilities. A ten day advance period is required in writing to produce the alternate format.

APPLICATION FOR LIQUOR LICENSE LIMITED LIABILITY COMPANY (LLC) INSERT - FORM 3b

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: www.lcc.ne.gov

Office Use

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NEBRASKA LIQUOR CONTROL COMMISSION

All LCC members, including spouses, are required to adhere to the following requirements

- 1) Must be a citizen of the United States
- 2) Must provide a copy of their certified birth certificate or INS papers
- 3) Must submit their fingerprints (2 cards per person)
- 4) Must sign the signature page of the Application for License form (even if spousal at fidavit has been submitted)

Submitted)
Attach copy of Articles of Organization (Articles must show barcode receipt by Secretary of States office)
Name of Registered Agent: Paulina Rawes
Name of Limited Liability Company that will hold license as listed on the Articles of Organization
Das é Agujes properties LLC
LLC Address: 2540 Southview CR.
City: Lincoln State: ME Zip Code: 685/2
LLC Phone Number: (402) 6/7-6475 Fax Number (402) 4/77 - 0870
Name of Contact Member (Name and information of contact member must be listed on following page)
Last Name: Ngrus En First Name: Paulini MI: T
Home Address: 2540 Southview CR City: Lincoln
State: 97 & Zip Code: 68512 CEll Home Phone Number: (4'02) 617-6475
for
Signature of Contact Member
State of Nebraska Lancaster The foregoing instrument was ackno vledged before me this
February 9th 2009 by Pauling Name of persona knowledged
-amydang
Notary Public signature Affix Seal Here A GENERAL NOTAR State of Nebraska AM DANG My Comm. xp. July 7, 2012

List names of all members and their spouse	es (even if a spousal affidavit has been sub		1.751 1.25 1.35
Last Name: Rquyen	First Name: faulina	MI:	-
Social Security Number: 507-27-			
Spouse Full Name (indicate N/A if single):	Dao Hai'		
Spouse Social Security Number: 505-	- 27- 2778 Date of Birth: //	1-17-71	
Last Name:	First Name:	MI:	
Social Security Number:	Date of Birth:		
Spouse Full Name (indicate N/A if single):			
Spouse Social Security Number:	Date of Birth:		
Last Name:	First Name:	MI:	
Social Security Number:	Date of Birth:		
Spouse Full Name (indicate N/A if single):_			
Spouse Social Security Number:	Date of Birth:		
Last Name:	First Name:	MI:	
Social Security Number:	Date of Birth:		
Spouse Full Name (indicate N/A if single):_			
Spouse Social Security Number:	Date of Birth:		
Last Name:	First Name:	MI:	
Social Security Number:	Date of Birth:		
Spouse Full Name (indicate N/A if single):_			

Is the applying Limited Liability Company contr	olled by another	Corporation	n/Comp any	?	
□YES ¥NO					
If yes, provide the name of corporation/company	and supply an or	ganizationa	al chart		
		······································			
Indicate the company's tax year with the IRS (Ex	ample January th	ırough Dec	ember)		
Station Date To	- Company of the Comp		111111111111111111111111111111111111	: # i	The same of the
Starting Date: Jan	_ Ending Date:_	VEC	_3/	,	
Is this a Non Profit Corporation?	er de la companya de	To address of the second			である。 である。 は、これには、 大きない。 である。 で。 でる。 でる。 でる。 でる。 でる。 でる。 でる
□YES \no			allia, and regat has the	100 July 100	**************************************
If yes, provide the Federal ID #.					
			×		

In compliance with the ADA, this limited liability company insert form 3b is available in other formats for persons with disabiliti s. A ten day advance period is requested in writing to produce the alternate format

MANAGER APPLICATION INSERT - FORM 3c

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: www.lcc.ne.gov

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NEBRASKALIQUOR CONTROL COMMISSION

Corporate manager, including their spouse, are required to adhere to the following requirements

- 1) Must be a citizen of the United States
- 2) Must be a Nebraska resident (Chapter 2 006)
- 3) Must provide a copy of their certified birth certificate or INS papers
- 4) Must submit their fingerprints (2 cards per person)
- 5) Must be 21 years of age or older
- 6) Applicant may be required to take a training course

BURNOTES		
1.5	Corporation/LLC information. Store Corporation/LLC: AGUTEN S' CORPORATION	y UC
1	Name of Corporation/LLC: AGUYEAS' CORPORATION	
P	remise information	
X P	remise License Number:	
P	Premise Trade Name/DBA:	Fast Brak
P	remise Street Address: 2755 JAME LANE # 3 1648 S	acth St.
C	City: <u>L/NCOLN/</u> State: <u>N/8</u> Zip Coorremise Phone Number: (40) 420 - 0/98 477 - 552/	le: 185/2 \$ 685
P	remise Phone Number: (402) 420-0198-477-532/	
	he individual whose name is listed in the president of contact member category on e tust sign their name below.	ther insert form 3a or 3b.
150e		DECEMBER OF THE PROPERTY OF TH
	Jan	
-	CORPORATE OFFICER SIGNATURE	

(Faxed signatures are acceptable)

Manager's information must be completed below: R	LEASE PRINT CLEARLY
Gender: MALE FEMALE	
Last Name: NGVEN	First Name: PAULINA MI: 7
Home Address (include PO Box if applicable): 25	40 Southview CR.
City: LINCOLN/	State: \(\rangle \xi \) \(\rangle \) z ip Code: \(\lambda \xi \rangle \)
Home Phone Number:	Business Phone Number: (40) 1420 - 0198
Social Security Number: 507-27- 1414	_ Drivers License Number & State: 11 1214 9266
Date Of Birth: 1-25-76	Place Of Birth: Sai Gon, VN
Are you married? If yes, complete spouse's information	on (Even if a spousal affidavit has to ten submitted) : .
YES NO	COLD A COLD COLD COLD COLD COLD COLD COLD COLD
Spouse's information	
Spouses Last Name: 0 110	First Name: // //
Social Security Number: 505-27-279	_ Drivers License Number & State: VD 360430
Date Of Birth: // - /7 - 7/	
	T RESIDENCE(S) FOR THE PAST 10 YEARS.
APPLICANT YEAR	SPOUSE YEAR
Paulina Aguyen FROM TO LINCOLN NE 1997 2008	Lincoln NE 1997 2008
777 700	717 000
MANAGER'S LA	STTWO EMPLOYERS
YEAR NAME OF EMPLOYER FROM TO	NAME OF SUPERVISOR TELEPHONE NUMBER
2005 2006 MAPLE NAIL	LINIDA A (Sold Brussinss)
1997 2003 CENTURION	Tuny MAY (ENSUMESS closed)

Mana PL	ger and spouse musi EASE PRINT CLE	review and answer the	questions, below			
1.	READ PARAGR	APH CAREFULLY A	ND ANSWER CO	MPLETELY ANI	D ACCURATELY.	
	to any charge. Chalaw; a violation of occurred and the year.	Has <u>anyone</u> who is a party to this application, or their spouse, <u>EVER</u> been conviceed of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. <u>If more than one party, please list charges by each individua</u> 's name.				
	□YES 📉	IO If yes, please	explain below or	attach a separate pag	g 3 .	
			*			
-					· ·	
2.	Have you or your state? IF YES, list	pouse ever been approve the name of the premise	ed or made applica	tion for a liquor lice	r se in Nebraska or any other	
	□YES	NO				
3.	Do you, as a manag Liquor Control Act	er, have all the qualifica (§53-131.01)	ations required to h	old a Nebraska Liqu	ı)r License? Nebraska	
	YES	NO				
4.		equired fingerprint card e made out to the Nebra				
	YES	□NO				

Is the applying Corporation controlled by another Corporation?		
□YES NO	,	
If yes, provide the name of corporation and supply an organizational chart		
Indicate the Corporation's tax year with the IRS (Example January through Decemb		
Starting Date: Tune - Ending Date: 26.	The state of the s	
Is this a Non-Profit Corporation?		
□YES 🙀 NO		
If yes, provide the Federal ID #.		

In compliance with the ADA, this corporation insert form 3a is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

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FEB 1 0 2009

NEBRASKA LIQUOR CONTROL COMMISSION

DAO & NGUYEN PROPERTIES, LLC

I'm Paulina Nguyen and my husband's Hai Dao had bought the SOUTH FAST BREAK, 1648 SOUTH Street, LINCOLN, NE 68502 from THANH MAI PROPERTIES, LLC on Jan 01, 2009

Signature of Seller

than I mai

Signature of Buyers

Hain De

I'm faulina Tyujen & my husband's Hai Dao and leasing that to Dao & Tyujen properties LLC. Local the property located at South Fast Breek 1648 South St. NE 68502 for \$1,50.00/mos Expired 2019, April 30.



ARTICLES OF ORGANIZATION OF DAO & NGUYEN PROPERTIES, LLC

The undersigned, desiring to form a limited liability company for the pur poses hereinafter set forth, under and inconformity with the laws of the State of Nebraska (lo hereby make this written certificate in duplicate and hereby verify:

- 1. Name. The name of the company shall be Dao & Nguyer Properties, LLC.
- 2. Duration. The period of duration of the company shall be perpetual.
- 3. Purpose. The company is organized to engage in and to co any lawful act concerning any and all lawful business, other than bank or insurance, for which a limited liability company may be organized under the laws of Ne raska.
- 4. Principal Place of Business Registered Agent. The acdress of the principal place of business of the company in Nebraska is:

1648 South Street Lincoln, NE 68502

The name and address of the company's registered agent in Nebraska is:

Paulina Nguyen 2540 Southview Cir. Lincoln, NE 68512

5. Property Contributed. The total amount of loans contributed is \$250,000.00

A description and agreed value of property other than loans contributed: None

Name

Amount

Percentage of Own ership

None

6. Additional Contribution. The total additional contributions agreed to be made by all members and the times at which or events upon the happening of which they shall be made are as follows: Each member will contribute cash and further intellectual property as needed throughout the term of this entity pursuant to and in accordance with the Operation Agreement of the original members of even date.

- 7. Additional Members. The members of the company have the right of admit additional members from time to time, only, however, upon the unanimous approval and upon additional term and condition of admission as may be determined by the members at the time of admission. Except as I rovided in the Operating Agreement, the interests of the members in the compar y may not be transferred or assigned.
- 8. Right to Continue Business. In the event of the death, refirement, resignation, expulsion, or dissolution of member or the occurrence of an / other event which terminates the continued membership of a member in the limited 1 ability company, then by unanimous consent the remaining members of the company have the right to continue the business of the company, at their election and option.
 - 9. Management. Management of the company shall be vest: d in its initial members on an equal basic. This may be adjusted or changed only with the unanimous consent of the members. The names and addresses of the members are:

Members Name	Addresses	
Paulina Nguyen	2540 Southview Cir	

10. Internal Affairs. The regulation of the internal affairs of the company arc set forth in the Operating Agreement of the company and shall govern the operation of the business and the members accordingly.

EXECUTED in duplicate original counterparts by the undersigned member on the 01st day of Jan, 2009.

Paulina Nguyen

STATE OF NEBRASKA

) 88.

COUNY OF LANCASTER

On the 01st day of Fab, 2009, before me, a Notary Public duly commissioned and qualified in said county, personally came Paulina Nguyen known to me to be the identical person whose name is affixed to the foregoing instrument and acknowledge the execution theroof to be his and her voluntary act and deed.

Witness my hand and notary seal the date and year last above written.

A GENERAL NOTARY-State of Nebraska

AMY DANG

My Comm. Exp. July 7, 2012

Notary Public

Ho Chi Minh City District: Phu Nhuan Precint:

Year: 1976 Number 226

BIRTH CERTIFICATE (COPY)

Name:

TUYET-MAI THI

NGUYEN

(First name)

(Last name)

Sex (male or female):

Female

Date of Birth:

01/25/1976

(DOB in Words): Place of Birth:

25th Day of January, Year of 1976 at 04:30 AM.

"Tay Nhi" Maternity hospital.

Father's name, age & nationality: Le Nguyen, 43 years old, Vietnam

(Middle)

Father's occupation & residence: Motorized cyclo driver,

108/15 Nguyen Huynh Duc Street, I hu Nhuan

Mother's Name, Age & Nationality: Vung Thi Nguyen, 37 years old, Vietnam

Mother's occupation & residence: House keeper,

108/15 Nguyen Huynh Duc Street, Phu Nhuan

Registered at Phu Nhuan on 02/03/1976

Copied

Ho Chi Minh City, on 02/03/1976

Judicial Registrar

6 Quang (Signed & stamped)

Certification of translator's competence

I, Dau Nguyen, hereby certify that the above is an accurate translation of the original "Ban Sao Giay Khai Sinh" in Vietnamese, using a common form, and that I am comperent in both English and Vietnamese to render such translation.

Date 10/10/2008

Signature of translator

Dau Nguyen

State of Nebraska, County of Lancaster

Subscribed and sworn to before me on this

10th day of October 2008

GENERAL NOTARY - State of Nepraska **EMILY NGUYEN** My Comm. Exp. July 1, 2012

SALONOVARADCARANCO PROCESSO (BE No. 23638838 In S Registration no. 142 361 224 Dersonal description of holder as of date of issuance of this certificate; Date of both January 25, 1976; sec Female complexion Medium color of eyes Brown color of hair Black height 5 feet 5 inches: weight 140 pounds; visible distinctive marks None maritul status Married Country of former nationality Vietnam (Complete and true signature of whiter) Reit known that PAULINA THE NOUYEN residing at 4700 North 20th Street, Lincoln, Nebraska 68521 having applied to the Compassion of Sommigration and Haburalization for a Conficule of Naturalization and Making properties satisfaction of the Court for the District "was naturalized by the United States District Court for the District of Nebraska, Lincoln, Nebraska, on July 3, 1997"; In the Immigration and Carionalisty list this Contained in the Survey and Carionalisty list this Contained Rationalists in the Survey of Materialists in the asued this Trenty-There dayof Ver mmeleon/lunaria/ana/: \$50 Ninety-Eight and the seal of the Department of Justice for the pursuant testable IT IS PUNISHABLE BY U. S. LAW TO COPY. PRINT OR PHOTOGRAPH THIS CERTIFICATE WITHOUT LAWFUL AUTHORITY. 542920

RECEIVED FEB 10 2008 NEBRASKA LIQUOR CONTROL COMMISSION

The Secretary of State of the Unifed States of America bereby requests all whom it may concern to permet the citizen national of the United States named berein to pass without a clay or hindrance and in case of need to give all lawful aid and protection.

Le Secrétaire

prie par les présentes toutes ou ressortissant des Etatsdifficulté et, en cas de besoins

de la sser passer le citoyen présent pas eport, sans delai ni toute aide t protection legitimes.

El Secretario de Estado de mérica po el presente solicità a las autoridades competent no o nacimal de los Estados Unidos aqui nombrado, si des, y en case de nei sidad, prestarle toda la protection licitas.

SIGNATURE OF BEARENSIGNATURE DU TITULAIRE FIRMA DEL TITULAR

NOT VALID UNTIL SIGNED



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Charleston Passport Center

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Republic of Vietnam Saigon Capitol District: 4 Precinct: Number: 3916

RECEIVED

CONTROL COMMISSION

BIRTH CERTIFICATE

(COPY) On 10/19/1971

Name:

HAI

VAN

DAO

(First name)

(Middle)

(Last nar 1e)

Sex (male or female):

Male

Date of Birth:

(DOB in Words):

10/17/1971

17th Day of October, Year of 1971

Place of Birth:

"Ton That Thuyet" Maternity host ital, Saigon

Father's name:

Mother's Name:

Legal wife or illegal wife?

Declarer's Name:

Quang Van Dao Thanh Thi Mai

Legal wife

Phuc Thi Tran

Copied from the Original

Saigon, on 02/04/1975

Signed for Judicial Registrar

Senior Clerk of the Office of Administration & Military service

Chuong Ngoc Nguyen (Signed)

Certification of translator's competence

I, Dau Nguyen, hereby certify that the above is an accurate translation of the original "Trich Luc Bo Khai Sanh" in Vietnamese, using a common form, and that I am competent in both English and Vietnamese to render such translation.

Date 10/10/2008

Signature of translator

Dau Nguyen

State of Nebraska, County of Lancaster

Subscribed and sworn to before me on this

10th. day of October 2008

GENERAL NOTARY - State of Nebraska EMILY NGUYEN My Comm. Exp. July 1, 2012

The Secretary of State of the United States of An bereby requests all whom it may concer to permit the citizen of the United States named herein to p iss without delay or hindran and in case of need to give all la wful aid and protection

Le Secrétaire d'Etat des Eta s-Unis anglé prie par les présentes toutes autorités com étentes de la la on ressortissant des Etats-Unis titulaire à 1 présent passeport, sons les many sons de difficulté et, en cas de besoin, de lui accord r toute aide et protection legit many SSION

El Secretario de Estado de los Estados Unidos a América por el presente solicita a las autoridades competentes permitir el paso del ciu adano o nacional de los Estados Unidos aqui nombrado, sin demora ni dificultades, y n'easo de necesidad, prestarle toda la ayuda y protecció i lícitas.

SIGNATURE OF BEARER/SIGNATURE DU LITULAIRE/FIRMA DEL TITULAR

NOT VALID UNTIL SIGNED

See Page 24

OVALARID SA RATRES (D) BY WITHING (OV

/ Pottigo Pasaport Ne. / No. du Pasagnor 301630796

DAO Given names / Prenome : Nomi es HAI VAN Nationality / Nationalité / Nacior ilidad

UNITED STATES OF AME ICA

Date of birth/ Date de nalasano /decha de nacimiento

17 Oct 1971 Sex / Sexe / Sexo Place of biri / Lieft de nalesance / Lugar de nacimiento

M VIETN M Date of issue / Date de dell'yran 1/ Fecha de expedición

12 Mar 2002 Date of expiration / Date plexpilinon/ Fecha de caducidad 11 Mar 2012

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Charleston Passport Center

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ANTO SECONDE DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION D



No. 23639418

Personal description of holder as of date of naturalization:

Date of birth: October 17, 1971

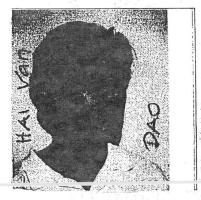
Male

Height: 5 feet 5 inches

Marital status: Married

Country of former nationality:

Vietnam



INS Registration No. A71 003 269

I certify that the description given is true, and that the photograph affixed hereto is a likeness of me.

Be it known that, pursuant to an application filed with the Attorney General

Omaha, Nebraska

The Attorney General having found that:

HAI VAN DAO

then residing in the United States, intends to reside in the United States when so required by the Naturalization Laws of the United States, and had in all other respects complied with the applicable provisions of such naturalization laws and was entitled to be admitted to citizenship, such person having taken the oath of allegiance in a ceremony conducted by the United States District Court for the

District of Nebraska

Omaha, Nebraska

Sentember 16 1007

that such person is admitted as a citizen of the United States of America.

IT IS PUNISHABLE BY U. S. LAW TO COPY, PRINT OR PHOTOGRAPH THIS CERTIFICATE, WITHOUT LAWFUL AUTHORITY.

